



ELIZABETH L. WHITE
CLERK OF THE MARION CIRCUIT COURT
Accounting & Child Support Division
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Indianapolis, Indiana 46204
(p) 317.327.4709 Fax 317.327.4813

Child Support Information Change Form

Name: _____ ☐ Custodial Parent ☐ Non-Custodial Parent

ISETS Account # or Social Security #: _____ Telephone #: _____

Requested Change:

☐ Change of Address:

New Address: _____
Street Address

City State Zip

Old Address: _____
Street Address

City State Zip

☐ Name Change:

New Name: _____

Old Name: _____

Verification Document:

Please present your verification documentation upon completing this form. If mailing this form, please include a clear copy of your verification documentation. (Verification documents include Driver's License, State ID, Military ID, Marriage License, etc.)

☐ Driver's License / State ID ☐ Marriage License ☐ Other _____

Signature: _____ Date: _____